BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09175149/ATT-097PH

								0	1//04	<u> 29</u>	1417	- 07724
		CLAIMS A	S FILED - PART I (Column 1) (Colu			mn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			80					RATE	FEE	1	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			20 mir	nus 20=	· 7-		I	X\$ 9=	_	OR	X\$18=	
INDEPENDENT CLAIMS			.5 mi	nus 3 =	* 2			X40=		OR	X80=	160
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		1	+270=	700
* If	the difference	in column 1 is	ess than zero, enter "0" in c			olumn 2	l	TOTAL,		OR	TOTAL	6 6
CLAIMS AS AMENDED - PART II								IOIAL &	<u> </u>	OR	OTHER	14 70
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ſ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	İ	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ì	+135=		1	+270=	•
							Ĺ	TOTAL		OR	TOTAL	
		6 1 4)			- \		A	ADDIT. FEE		OR	ADDIT. FEE	
_	The second secon	(Column 1) CLAIMS		(Colur HIGH		(Column 3)	_			1 1	· · ·	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CL AINA			X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)					ADDII. 1 EE	·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent "	*	Minus	***		=		X40=			X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM					OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									-	OR	+270=	
**	If th "Highest Nur	mber Previously Pa mber Previously Pa	id For" IN THE	S SPACE is	s less tha	n 20, enter "20."	Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		ber Previously Pai					r four	nd in the ann	ropriate box	r in col	umn 1	